

Practitioner's Docket No. LO25-003

#14 reg for ref
10/2/03
PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Frank Melzer et al.

Application No.: 09/888,214 Group No.: 2872

Filed: June 21, 2001

Examiner: Ricky D. Shafer

For: "Method of Connecting a Multiplicity of Optical Elements to a Basic Body"

Commissioner for Patents and Trademarks
Washington, D.C. 20231

ATTENTION: Refund Section, Accounting Division, Office of Finance

REQUEST FOR REFUND
(IMPROPER CHARGE OF DEPOSIT ACCOUNT)

I. RETURN OF REFUND REQUEST

This is a request for a refund, with respect to the debit to Deposit Account 23-0925, shown on the statement dated August 12, 2003 for the above-identified application.

A copy of the monthly statement, in which the error referred to occurs, accompanies this request. A copy of the return postcard, dated July 23, 2003; Transmittal Form, dated July 23, 2003; page 1 and page 5 of Response to April 23, 2003 Office Action, accompanies this request.

CERTIFICATE OF MAILING/TRANSMISSION (37 C.F.R. 1.8(a))

I hereby certify that, on the date shown below, this correspondence is being:


MAILING

- ☐ deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to the Commissioner for Patents and Trademarks, Washington, D.C. 20231.

FACSIMILE

- ☒ transmitted by facsimile to the Patent and Trademark Office. 703-308-6778

Date: 14 August 2003


Signature

Rhonda G. Rambo

(type or print name of person certifying)

(Request for Debit (Improper Credit of Deposit Account)—page 1 of 2)

7 total Pages

II. FEES CHARGED FOR WHICH REFUND IS REQUESTED

	AMOUNT OF REFUND REQUESTED
Improper charge for Claims in Excess of Twenty	\$72.00
TOTAL REFUND REQUESTED	\$72.00

III. EXPLANATION OF WHY CONTESTED CHARGE IS IN ERROR

The original filing of this application on June 21, 2001 included; 21 total claims with 3 Independent claims.

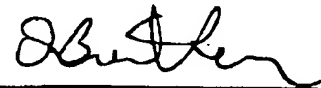
On July 23, 2003 we filed a response to the April 23, 2003 Office Communication from the PTO. In the July 23 response; we withdrew claims 5-21 and added new claims 22-25. Therefore, no additional fees are believed to be required.

Please credit Deposit Account No. 23-0925 with the above fee amount.

IV. MANNER OF REFUND

Please Credit Account No. 23-0925.

Date: 8-14-03



D. Brent Kenady
Reg. No. 40,045
Wells St. John P.S.
601 West First Ave., Suite 1300
Spokane, WA 99201-3828
Tel. No.: (509) 624-4276
Customer No.: 021567

(Request for Debit (Improper Credit of Deposit Account)—page 2 of 2)



UNITED STATES
PATENT AND
TRADEMARK OFFICE

5. *Staphylococcus aureus*

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Deposit Account Statement

Requested Statement Month: August 2003
Deposit Account Number: 230925
Name: WELLS ST JOHN & ROBERTS GREGORY & MATKIN PS
Attention: ATTN BARBARA SCHURRA
Address: 601 WEST FIRST AVENUE SUITE 1300
City: SPOKANE
State: WA
Zip: 99201-3817

DATE	SEQ	POSTING REF TXT	ATTORNEY DOCKET NBR	FEE CODE	AMT	BAL
08/01	846	78281965	SC53-101	7001	\$335.00	\$13,377.00
08/04	1	09785858	MI22-1636	1251	\$110.00	\$13,267.00
08/04	63	02739537	DA37-112	8504	\$30.00	\$13,237.00
08/06	70	6475852		1811	\$100.00	\$13,137.00
08/06	938	76410476	PO4-1180	7003	\$100.00	\$13,037.00
08/07	284	PP010141	ZI10-501	8003	\$45.00	\$12,992.00
08/07	285	PP004820	ZI10-501	8003	\$45.00	\$12,947.00
08/07	286	PP010114	ZI10-501	8003	\$45.00	\$12,902.00
08/07	287	PP007063	ZI10-501	8003	\$45.00	\$12,857.00
08/07	288	PP009681	ZI10-501	8003	\$45.00	\$12,812.00
08/07	289	PP006172	ZI10-501	8003	\$45.00	\$12,767.00
08/07	290	PP008621	ZI10-501	8003	\$45.00	\$12,722.00
08/07	291	PP006702	ZI10-501	8003	\$45.00	\$12,677.00
08/07	292	PP011392	ZI10-501	8003	\$45.00	\$12,632.00
08/07	293	PP011385	ZI10-501	8003	\$45.00	\$12,587.00
08/07	294	PP011378	ZI10-501	8003	\$45.00	\$12,542.00
08/07	295	PP008545	ZI10-501	8003	\$45.00	\$12,497.00
08/07	296	PP004587	ZI10-501	8003	\$45.00	\$12,452.00
08/07	516	78284162	IN46-101	7001	\$335.00	\$12,117.00
08/11	1	09737529		2801	\$375.00	\$11,742.00
08/11	298	09944689		9204	-\$9.00	\$11,751.00
08/12	2	09888214	LO25-003	1202	\$72.00	\$11,823.00
08/12	19	09699897	H001190(4016	1251	-\$110.00	\$11,789.00
08/12	55	PCT/US03/22080	H0004116-PCT	1602	\$250.00	\$11,539.00

START BALANCE	SUM OF CHARGES	SUM OF REPLENISH	END BALANCE
\$13,712.00	\$2,292.00	\$119.00	\$11,539.00

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LO25-003 (DBK)
Carl-Zeiss

July 23, 2003

The stamp of the U.S. Patent and Trademark Office acknowledges receipt of the following papers relating to the Patent application of Frank Mueber, Serial No. 09/828,214, filed June 24, 2001, entitled "Method of Connecting a Multiplicity of Optical Elements to a Basic Body".

1. Return Postcard Receipt
2. Transmittal Form
3. Response to April, 2003 Office Action.

EV317135800

LO25-003 (DBK)
Carl-Zeiss

July 23, 2003

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EV317135800


EV 21, 135800

PTO/SB/21 (05-03)

Approved for use through 04/30/2003. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/888,214	
	Filing Date	June 21, 2001	
	First Named Inventor	Frank Melzer	
	Art Unit	2872	
	Examiner Name	R.D. Shafer	
Total Number of Pages in This Submission	10	Attorney Docket Number	LO25-003

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Postcard
Remarks: NO FEES REQUIRED. The Commissioner is hereby authorized to charge any additional fees required under 37 CFR Sections 1.16 and 1.17 and credit any overpayments to: 23-0925.		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	D. BRENT KENADY - Reg. No. 40,045 WELLS ST. JOHN P.S. - Customer No. 021567	
Signature		
Date	7-23-03	